DOCUMENT RESUME

ED 205 611 TM 810 521

AUTHOR Holden, Barbara
TITLE Evaluation of Supportive Services in Early Childhood Programs, 1979-1980. Technical Summary. Report No. 8127.
INSTITUTION Philadelphia School District, Pa. Office of Research and Evaluation.
PUB DATE Mar 81
NOTE 28p.

EDRS PRICE MF01/PC02 Plus Postage.
DESCRIPTORS *Ancillary School Services; Dental Evaluation; *Early Childhood Education; Medical Services; Mental Health Programs; *Program Evaluation; Social Services
IDENTIFIERS *Philadelphia School District PA

ABSTRACT

Supportive services for early childhood education in the Philadelphia School District included four service areas: medical, dental, social and mental health. In six early childhood programs, 69-100 percent of the children received vision screenings, 44-77 percent received hearing screenings, 54-75 percent received growth screenings, and 73-84 percent received dental screenings. Medical problems were most frequently identified, followed by dental problems; all problems were referred for treatment. In preschool programs, children were served breakfast, lunch and a mid-morning or mid-afternoon snack; in Original Follow Through, breakfast and lunch were served. A total of 6239 families were identified as needing social services. Seventy-eight social service workers made 108,319 direct family contacts. A total of 601 children were referred for mental health services. Speech impairments, behavior problems, and learning disabilities were the problems most frequently reported. (Author/BW)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

U.S. DEPARTMENT OF EDUCATION
NATIONAL INSTITUTE OF EDUCATION
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
☒ This document has been reproduced as received from the person or organization originating it.
☐ Minor changes have been made to improve reproduction quality.
• Points of view or opinions stated in this document do not necessarily represent official NIE position or policy.

ED205611

TECHNICAL SUMMARY: EVALUATION OF SUPPORTIVE SERVICES IN EARLY CHILDHOOD PROGRAMS, 1979-1980

Prepared By:

Barbara Holden

of the

Early Childhood Evaluation Unit

March 1981

Report #8127

Irvin J. Farber
Director
Priority Operations
Evaluation Services

Thomas C. McNamara
Manager
Early Childhood Evaluation

Bernard Solomon
Executive Director

OFFICE OF RESEARCH AND EVALUATION
The School District of Philadelphia

TM 810 521

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY
H. M. Kean
TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

MEMBERS OF THE BOARD OF EDUCATION

Mr. Arthur W. Thomas, President

Mrs. Edward Oberholtzer, Vice President

Mr. Augustus Baxter

Mrs. Toyann Boonin

Mr. Joseph H. Previty

Mr. Samual H. Rubin

Mrs. Michael Stack

George Philip Stahl, Jr., Esq.

Dr. Nicholas Trolio

* * * * * * * * *

Dr. Michael P. Marcase, Superintendent of Schools, Secretary & Treasurer

Mr. Charles A. Highsmith, Deputy Superintendent

* * * * * * * * *

Dr. Constance E. Clayton
Associate Superintendent
Early Childhood Education

Thomas C. Rosica
Executive Director
Federal Programs

ABSTRACT

This 1979-1980 Supportive Services Report focuses on the type and and quantity of services provided to seven early childhood programs in four areas: medical, dental, social, and mental health. At least one of these services, and in most cases more than one, were provided in fairly extensive form in the following programs: Get Set, Head Start, Child Care, Original Follow Through, Follow Through Title I Expansion, Project Bridge, and Primary Skills. The provision of nutritional services in three of the programs was also briefly discussed.

Across six of the above programs, (Get Set, Head Start, Original Follow Through, Follow Through Expansion, Primary Skills and Project Bridge) the majority of children participated in more than one type of medical services, i.e., on-site vision, hearing, growth and dental screenings, as well as, physical examinations which were provided by private physicians, community agencies, etc. (in preschool programs,) and School Districts Health Services Division (schoolage programs).
It should be noted that Child Care and Parent Cooperative Nursery also arranged for health appraisals and immunizations. Medical problems, i.e., those found through physical examinations and dental defects were identified most frequently.

In all programs, 100% of the problems found were referred for treatment. Treatment was provided in almost every instance at the preschool level. In Original Follow Through, Parent Involvement Coordinators were available to make contacts regarding treatment. In other schoolage programs, reporting treatment received was completely dependent on family responding. The lower rates of reported treatment, therefore, seems

attributable to the fact that parents failed to report back to the school when treatment had been obtained.

In the four programs where social services were available, (Child Care, Get Set, Head Start, and Original Follow Through) 78 social service workers or staff assigned social service responsibility made a total of 196,378 contacts with parents, community agencies and program personnel. The majority of contacts in all programs were with parents or guardians in relation to Classroom Attendance/Behavior of the Child and Sharing Program Information with the Family. Phone contacts and center conferences were the methods used most frequently in preschool programs to contact parents. In the schoolage program, home visits exceeded other modes of contacts.

Two supportive services components, health and social services, showed an increase in the amount of services provided from 1978-1979 to 1979-1980. During 1979-1980 medical screening increased from 1% to 17%. Social service contacts between social service workers and parents, community agencies, and program personnel increased 13%. In addition, in three of the four programs, the number of families identified as needing assistance and the number of families assisted increased from 1% to 25%.

Within three programs where mental health services were available (Get Set, Head Start, and Original Follow Through) a total of 547 children were seen by mental health consultants. Of these, 417 children received additional services. The most frequently identified impairments associated with these children were speech, learning, and behavioral problems.

TECHNICAL SUMMARY:
EVALUATION OF SUPPORTIVE SERVICES
IN EARLY CHILDHOOD PROGRAMS, 1979-1980

Overview of Supportive Services in Early Childhood

Supportive Services in early childhood consists of four major components: medical, dental, social, and mental health services. Only three programs (Get Set, Original Follow Through and Prekindergarten Head Start) are able to make provisions in all four areas. All programs, however, provide services in at least one of the areas.

Medical services in schoolage programs (Original Follow Through, Follow Through Expansion, Project Bridge, and Primary Skills) in 1979-1980 were provided by the School District's Division of School Health Services. In preschool programs (Get Set Day Care and Prekindergarten Head Start), where supplemental funds were available, program personnel arranged for and monitored health care.

Health personnel in the preschool programs (11 nurses, 1 dental hygienist, 1 physician in Get Set; 3 nurses and a health coordinator in Head Start) also consulted with staff about individual health care for children within the centers, provided emergency services, conducted health education workshops for parents and staff, conducted classroom talks and/or assemblies for children, etc.

Dental services in preschool programs were in part provided by program personnel. This service consisted of dental screenings and referrals for dental treatment. Monitoring of dental care was performed by the nursing staffs. In schoolage programs, dental screenings were provided by the

School District's Division of Dental Services. Supplemental funds were available for treatment only in the Original Follow Through program.

Social services were provided in four programs (Child Care, Get Set, Original Follow Through and Prekindergarten Head Start) and mental health services in three programs (Get Set, Original Follow Through, and Prekindergarten Head Start).

Overall, supportive services were provided to more than 16,000 children from 8,100 families.

TECHNICAL SUMMARY:

EVALUATION OF SUPPORTIVE SERVICES, 1979-1980

I. MEDICAL SERVICES

A. Number of Children Who Received Physical Examinations and Medical Screenings

TABLE I

Number (N) and Percentage (%) of Children Who Received Physical Examinations and Vision, Hearing, and Growth Screenings.

Program	Program Enrollment	Physical Examinations		Screenings					
				Vision		Hearing		Growth	
		N	%	N	%	N	%	N	%
Get Set	3800	4277	100[1]	3885	100[1]	1868[2]	49	2193	58
Head Start	1430	1256	88[3]	1012	71	1431[4]		1075[5]	75
Original Follow Through	2500	905 (63% of Grade 1)	26	1994	80	1785	71	1274	51
Follow Through Expansion[6]	7100	1583 (86% of Grade 1)	22	5857	82	5437	77	4334	61
Primary Skills	3500	933 (94% of Grade 1)	27	2400	69	2360	67	1984	57
Project Bridge	2100	36 (Special referrals)	02	1597	76	1133	54	1135	54
TOTAL	20,430	8990		16,745		14,014		11,998	59

1. Totals for physical examinations and vision screenings reflect the number of children examined throughout 1979-1980. Due to the continuing enrollment policy, the total population receiving examinations was larger than the number of children enrolled at any one time.

2. This figure reflected the number of reported speech and hearing screenings.

3. Although all children must be screened within 90 days to satisfy School District mandates, this figure reflects the fact that late entrants to the program had not yet been screened at the end of the year although still within the 90 day period.

4. Some children received two screenings.

5. Growth screenings were provided in 23 centers where scales were available.

6. These figures refer to services received from regular School District Health personnel; a similar situation prevailed in the other school age program.

Summary statement: Across the six programs, 8990 physical examinations, 16,745 vision screenings, 14,014 hearing screenings, and 11,998 growth screenings were provided. Overall, except for growth screenings, the exact percentage of children receiving the various types of medical services could not be determined because the data were either cumulative based on continuing enrollment (Get Set) or some children were screened twice (Get Set and Head Start).

In addition to the above programs and according to program staff, 100% of the children in Child Care and in Parent Cooperative Nursery received vision and hearing screenings. These screenings were provided by PEACH (hearing) and the Pennsylvania Association for the Blind (vision).

Within the preschool programs (Get Set, Head Start, and Parent Cooperative Nursery), evidence of completed physical examinations (health appraisals) and immunizations were due on entry or before 90 days of attendance. In Child Care this evidence was required upon entry. This medical requirement was met, but see note above.

In schoolage programs, physical examinations were mandated by the School District's Health Services Division in Grade 1. The percentages of physical examinations in Table 1 were based on program enrollment at this grade level[1] and indicated that from 63% to 94% of the children received this service.

B. Types of Health Problems

TABLE 2

Number (N) and Percentage (%) of Identified Health Problems

Problems	Get Set		Head Start		Original Follow Through		Follow Through Expansion		Primary Skills		Project Bridge		TOTAL	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Medical	1219	87	123	19	243	37	619	40	262	42	10	4	2476	48
Vision	92	7	84	13	326	49	626	40	252	41	176	61	1556	30
Hearing	26	2	344	52	46	7	151	10	57	9	38	13	662	13
Growth[1]	54	4	103	16	49	7	170	10	50	8	65	22	491	9
TOTAL	1391	100	654	100	664	100	1566	100	621	100	289	100	5185	100

1. Children were either over or underweight.

Summary Statement: Medical problems, i.e., those found through physical examinations, were the type identified most frequently in Get Set, representing 87% of the total number of problems. In Head Start, hearing problems occurred most frequently, representing 52% of the total number of problems. Vision defects occurred most frequently in Original Follow Through and Project Bridge, 49% and 61% respectively. In both Follow Through Expansion and Primary Skills,

1. Enrollment figures for grade 1 were taken from the Principal's Monthly Report at the end of March 1980, which showed: 572 children in Original Follow Through, 1839 in Follow Through Expansion, and 995 in Primary Skills.

medical problems and vision defects each represented approximately 40% of the total number of problems found.

In all programs, 100% of the problems found were referred for treatment.

C. Treatment Status of Referred Health Problems

TABLE 3

Number (N) and Percentage (%)[1] of Referred Health Problems Under Treatment or With Treatment Completed

Problems	Get Set		Head Start		Original Follow Through		Follow Through Expansion		Primary Skills		Project Bridge		TOTAL	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Medical	1189	98	123	100	69	28	286	46	105	40	7	70	1779	72
Vision	86	93	84	100	140	43	298	48	140	56	72	41	820	53
Hearing	24	92	344	100	19	41	72	48	25	44	17	45	501	76
Growth[2]	42	79	103	100	27	55	61	36	6	12	19	29	258	53

1. Percentages were derived from the ratio of the number of problems identified (Table 2) to the number of problems treated (Table 3).

2. Children were either over or underweight.

Summary Statement: One hundred percent (100%) of the identified problems in Head Start and from 92% to 98% of the identified problems in Get Set were treated.

In the schoolage programs, where the procedure for reporting the number of problems treated required parents to respond to medical notices sent by school health personnel, at least 28% of the medical problems, and 41% of the vision and hearing problems were reported as having been treated.

Across the six programs, treatment occurred at approximately the same high percentage rate (72, 76%) for medical and hearing problems on the one hand, and at the same mid-range (53%) for vision and growth problems.

II. DENTAL SERVICES

A. Dental Screenings and Referrals

TABLE 4

Number (N) and Percentage (%) of Children Who Received Dental Screening, and the Number of Children Identified as Having Dental Problems.

Program	Program Enrollment	Dental Screenings		Number of Children with Dental Problems (Based on Screenings)	
	APPROXIMATE	N	%	N	%
Get Set	3800	2815[1]	74	958	34
Head Start	1430	1087	76	236	22
Original Follow Through	2500	1829	73	686	38
Follow Through Expansion	7100	5406	76	1970	28
Primary Skills	3500	2852	81	991	35
Project Bridge	2100	1765	84	702	40
TOTAL	20,430	15,754	77	5,543	35

1. The total number of screenings provided in Get Set was 4998. The figure in the table (2815) represents the number of children screened by dental hygienists only. Health Education Specialists provided an additional 2183 dental screenings but many of those children had already been screened by the dental hygienists.

Summary Statement: Seventy-seven (77%) percent of the children across the six programs received dental screenings. Of this number, 35% of the children were noted as having dental problems (primarily caries).

Within program, from 73% (Original Follow Through) to 84% (Project Bridge) of the children received dental screenings while from 22% (Head Start) to 40% (Project Bridge) were reported as having dental problems.

It should be noted that across all programs, 100% of the children needing dental treatment were referred.

B. Dental Treatment

TABLE 5

Number (N) and Percentage (%)[1] of Children Who Received Dental Treatment After Referral.

Get Set		Head Start		Original Follow Through		Follow Through Expansion[2]		Primary Skills		Project Bridge		TOTAL	
N	%	N	%	N	%	N	%	N	%	N	%	N	%
769	80	236	100	271	40	690	35	425	43	317	45	2708	49

[1]Percentages were based on the ratio of the number of children with dental problems (Table 4) to the number of children treated (Table 5).

[2]Data were received from 24 of the 28 Follow Through Expansion Schools.

Summary Statement: One hundred (100%) percent of the children with dental problems in Head Start and 80% of the children with dental problems in Get Set received dental care. In schoolage programs, from 35 to 45% of the children received treatment. Overall, 49% of the children with dental problems received treatment.

III. NUTRITIONAL SERVICES

A. Meals Served

TABLE 6

Number of Meals Served to Children in Three Programs: Original Follow Through, Get Set and Head Start.

	Original Follow Through	Get Set	Head Start[1]
Meals	900,000	1,368,000	514,800
Snacks	—	684,000	257,400

1. In Head Start, the nutritionist supervised the food program and provided nutritional training to parents, children, and staff. Nutritional education also included classroom demonstrations which involved children in food preparation.

Summary Statement: In preschool programs, children were served two meals, breakfast and lunch, and a mid-morning or mid-afternoon snack each day. In Original Follow Through, breakfast and lunch were served.

Calculations in Table 6 were based on enrollment figures taken from the Principals' Monthly Report, March 1980.

IV. SOCIAL SERVICES

A. Families Identified as Needing Services of a Social Service Nature.

TABLE 7

Number (N) and Percentage (%) of Families Identified as Needing Assistance of a Social Service Nature[1], and the Number of Families Assisted.

Early Childhood Programs	Number of Families	FAMILIES IDENTIFIED IN NEED OF SERVICE			
		Number of Families Identified as Needing Assistance		Number of Families Assisted	
	N	N	%	N	%
Get Set	3600	3490	97	2691	77
Original	2050	1020	50	926	91
Head Start	1450	1026	71	972	95
Child Care	1,000	703[2]	70	564[2]	80
TOTAL	8,100	6239	77	5153	83

1. Needing assistance was generally defined as any service that would assist families with any problem that interfered with children getting the full benefits of the program.

2. These figures represent the number of families served at 14 of the 16 Child Care centers.

Summary Statement: Seventy seven percent (77%) of the participating families across the three programs were identified as needing assistance of a social service nature.

Within programs, the number of identified families varied from 50% (Original Follow Through) to 97% (Get Set). A comparison between 1978-1979 and 1979-1980 showed that in three of the four programs, the number of families identified as needing assistance and the number of families assisted increased from 1% to 25%. In the fourth program (Child Care)

because of personnel vacancies in two centers during 1979-1980, a similar comparison could not be made (Refer to footnote #2). Social services, however, were provided to the two centers by the central office.

It should be noted that in Parent Cooperative Nursery social services were provided by the teaching staff when necessary.

B. Social Service Worker - Family Contacts

Table 8

Number (N) and Percentage (%) of Social Service Workers Family Contacts Related to Types of Presenting Problems

Presenting Problem	Get Set		Original Follow Through		Head Start		Child Care	
	N	%	N	%	N	%	N	%
Classroom Attendance/ Behavior of Child	15068	19	2352	21	3781	35	1637	16
Child's Physical Health	5298	7	2270	20	473	4	869	9
Child's Mental Health	716	1	324	3	0	-	258	3
Child's Progress Report	7112	9	765	7	0		851	9
Sharing Program Information With Family	15271	20	2426	22	1816	17	1689	17
Sharing Information About Community Agencies	5243	7	1070	10	100	1	796	8
Parent's Employment/Training/ Education/Illness	7391	10	596	5	35	-	1048	11
Intake-Termination Process and Recruitment	19250	25	523	5	3214	30	2556	26
Other	1371	2	875	7	1459	13	180	1
TOTAL	76356	100	11201	100	10878	100	9884	100

[1]Percentages represent proportions of contacts within programs.

Summary Statement: Three presenting problems in all four programs (though slightly different for pre-K and schoolage) comprised more than 50% of the contacts between families and social service workers. Percentages were based on the total number of contacts within programs. (Across the four programs 78 staff members were social service workers or had social service responsibilities.) In preschool programs they were: Classroom Attendance/Behavior of Child, Sharing Program Information with Family, and Intake-Termination Process and Recruitment. In the schoolage program, Original Follow Through, they were Classroom Attendance/Behavior of Child, Child's Physical Health, and Sharing Program Information with Family.

The three types of presenting problems which characterized prekindergarten programs, accounted for 64% of the contacts made by Social Service Workers in Get Set, 82% of the contacts made in Head Start, and 59% of the contacts made in Child Care. In Original Follow Through 63% of the contacts made were in the three areas listed above.

Generally, there was an increase in the number of Social Service Workers -- Family contacts from 1978-1979 to 1979-1980. Overall, the increases in the three programs were between 5% and 19%.

C. Relative Emphasis of Social Service Worker - Family Contacts

Table 9[1]

Relative Emphasis on Type of Contacts During the Year

Program	Classroom Attendance/ Behavior of the Child	Child's Physical Health	Child's Mental Health	Child's Program Report	Sharing Program Information With Family	Sharing Information Re: Community Agencies	Parent's Employment/ Training/ Education/ Illness	Intake Termination Process & Recruitment	Other
Child Care	3	4.5	8	6	2	7	4.5	1	9
Original Follow Through	1	2	9	6	3	4	7	8	5
Get Set	3	6.5	9	5	2	6.5	4	1	8
Head Start	1	5	8.5	8.5	3	6	7	2	4

1. The table entries are rankings within program based on the percentages in Table 14.

Summary Statement: The greatest number of contacts made in the Original Follow Through program and Prekindergarten Head Start were in the category Classroom Attendance/Behavior of the Child, whereas for Get Set Day Care and Child Care, Intake Termination Process and Recruitment ranked first. Child's Mental Health contacts seemed to rank last, probably because other means of providing for this area were available (See below).

D. Methods Used to Contact Families

TABLE 10

Methods Used; Number (N) and Percentage (%) by Social Service Worker in Contacting Families.

Program	Get Set Day Care		Original Follow Through		Prekindergarten Head Start		Child Care	
	N	%	N	%	N	%	N	%
Phone Contacts	38408	36	3650	27	4777	41	4944	42
Home Visits	1183	1	5538	40	2295	20	1	0.00
Conferences	36765	34	2013	15	3806	42	4939	42
Other	30961	29	2485	18	676	6	1968	16
TOTAL	107317	100	13686	100	11554	100	11852	100

Summary Statement: Phone contacts and center conferences were most frequently used in all the preschool programs. Home visits, in Original Follow Through, exceeded other modes of contact.

E. Contacts with Community Agencies and School Personnel

Table 11

Number (N) and Percentage (%) of Contacts with Community Agencies and

Program	Get Set Day Care		Original Follow Through		Prekinder-garten Head Start		Child Care	
	N	%	N	%	N	%	N	%
Sharing/Exchanging Information with Community Agencies	4883	15	735	12	293	5	1389	18
Referrals/ Agencies	3340	10	1475	25	93	1	1014	13
Acting on Child/Adult Behalf/ Agencies	4747	15	1135	19	1317	22	1379	18
Conference With Program Personnel	19095	60	2644	44	4363	72	3962	51
TOTAL	32065	100	5989	100	6066	100	7744	100

Summary Statement: In the Original Follow Through program 56% of the total non-family contacts made by Social Service Workers (Parent Involvement Coordinators) were with community agencies. In the preschool programs the majority (60%) of non-family contacts were with program personnel.

The total number of contacts made by Social Service Workers was 196,378. This figure is reflected in the combined totals of tables 10 and 11.

Within program data showed an increase of 8% to 41% in the number of Social Service Workers contacts in three program from 1978-1979 to 1979-1980. Reduction of Social Service providers in the one program (Original Follow Through) led to an increase of less than 1%. Overall, a 13% increase occurred from 1978-1979 to 1979-1980 in the total number of Social Service Worker contact with parents, community agency personnel, and program staff.

V. MENTAL HEALTH

A. Referrals for Mental Health Services

Table 12

Number (N) and Percentage (%) of Children Referred for Mental Health Services by Program[1]

Program	Period of Service Availability	Sites Encompassed In Data	Average Monthly Enrollment	Children Referred	% of Total Enrollment Referred
Get Set	10 Months	60	3800	188[2]	5
Original Follow Through	4-5 Months	9	1650	137	8
Head Start	10 Months	29	1430	276	19
TOTAL	4-10 Months	98	6880	601	9

1. Note that only three programs were able to provide this service.
2. Two hundred and eight children were originally referred for mental health services. Due to withdrawals from the program, the original number was reduced to 188.

Summary Statement: One hundred and eighty eight of the children (5%) in Get Set, 137 of the children (8%) in Original Follow Through, and 276 of the children (19%) in Prekindergarten Head Start were referred for mental health services. Note that in compliance with a program mandate, Head Start provided services to children designated special needs/handicapped children (at least 10% of the program population) as well as to other children referred by teachers. Overall, 601 children or 9% of the total average population of 6,880 were referred.

In addition to the above three programs, it should be noted that in Child Care some counseling services were available through the Social Workers. However, when more extensive services were needed referrals were made to community mental health agencies. In Parent Cooperative Nursery, children needing mental health services were referred to mental health agencies.

B. Number of Children Referred Who Received Mental Health Treatment

Table 13

Number (N) and Percentage (%) of Children Who Were Observed, Screened or Evaluated and of These, the Number Who Received Clinical Treatment.

Program	Children Observed or Screened or Evaluated	% of Children Referred Who Were Obs. Screened/or Evaluated[1]	Children Receiving Mental Health Services	% of Children Obs., Screened Evaluated Receiving Mental Health Services
Get Set	138	73%	66	48%
Original Follow Through	133	97%	75	56%
Prekindergarten Head Start	276	100%	276	100%
TOTAL	547	91%	417	76%

1. Percentages were based on the ratio of the number of children referred (Table 12) to the number of children observed, screened, or evaluated (Table 13).

Summary Statement: Seventy-three percent (73%) of the children referred for mental health services in Get Set, 97% of the children referred in Original Follow Through, and 100% of the children referred in Head Start were at least observed, screened, or evaluated by psychological staff or consultants.

Of the number of children observed, screened, or evaluated, 59 (48%) of the children in Get Set, 75 (56%) in Original Follow Through and 276 100% in Head Start received additional clinical services.

C. Presenting Problems or Handicapping Conditions Among Children Referred for Mental Health Services

Table 14

Types of Presenting Problems or Handicapping Conditions Among the Number of Children Referred for Mental Health Services - As Confirmed by Mental Health Consultants

Type of Presenting Problem or Handicapped Condition	Get Set[1]	Original Follow Through	Head Start[3]	Total
Visually Handicapped	0	0	6	6
Hard of Hearing	5	0	10	15
Speech[2] Impaired	74	4	152	230
Mental Retardation	1	0	4	5
Emotional Problems	0	12	5	17
Specific Learning Disability	0	1	4	5
Learning	1	28	14	43
Developmental Delay	4	3	0	7
Neurological	1	17	0	18
Multiple Handicapped	0	0	3	3
Behavioral	8	12	33	53
Health Impaired	0	0	33[4]	33
Other/ Pending	0	4	12	16
Not Reported	0	56	0	56
TOTAL	94	137	276	507

1. The number of problems identified by teachers and other staff members totaled 188. Only 94 of them were certified by mental health personnel.

2. Include both speech and speech/hearing impairments.

3. Within the Head Start program, the data included both children diagnosed as special needs on criteria, and teacher referrals.

4. In Head Start, physically handicapped children are also classified as children in need of mental health services. Overall, health services personnel were primarily responsible for the physically handicapped and the mental health specialists were rarely involved in these situations. This report focuses only on those children specifically identified as mentally handicapped.

Summary Statement: Speech impairments, behavior problems, and learning disabilities with frequencies of 230, 53, and 43 respectively, were the problems specifically identified most frequently.

The major impairment category in Get Set was speech defects involving 74 children. No other category approached this frequency. In Head Start, speech problems (152) were most frequently identified. The frequencies of almost all identified problems in Original Follow Through were relatively low, though 56 problems were not specifically identified.

D. Direct and Indirect Service Contacts with Parents and Staff

Table 15

Number (N) of Direct and Indirect Service Contacts with Parents and Program Staff

Programs	Direct Services[1]		Indirect Services[2]		
	Consultations/Conferences		Parent Workshops and/or Training Sessions	Staff Development	Planning
	Parents	Staff and Other Program Personnel			
Get Set[3]	--	--	--	--	--
Original Follow Through	33	249	6	19	20
Head Start	275	200	30	12	95
TOTAL	308	449	36	31	115

1. Direct Services were defined as diagnostic/treatment consultations with parents, staff, and other program personnel. Included were services provided directly to children receiving mental health services reported in Tables 13 and 14.

2. Indirect services consisted of conducting parent workshops and staff development sessions, and attending planning meetings.

3. In Get Set Day Care, where community mental health agencies provided services, neither direct or indirect service categories applied.

Summary Statement: In Original Follow Through, the most frequent contacts were of the direct type which included conferences with program staff, i.e., 249 staff conferences, that primarily focused on assisting staff to work competently with children and parents in mental health matters. Indirect services included 6 parent workshops, 19 staff development sessions and 20 planning meetings conducted by mental health consultants. In Prekindergarten Head Start, direct services (in Table 15) were more equally divided between parents and staff than indirect services. Most services were direct though there were 95 planning sessions.